

Pilot of the California Quality of Life and Lehman’s Quality of Life-Short Form
Summary Of Findings

- I. Demographics of Pilot Participants**
Pilot participants included adequate numbers within age categories (through age 64), major ethnic groups, and gender to allow for statistical analysis. There was little missing data (see figures listed below).
- Figure 1: Age composition*
Figure 2: Gender composition
Figure 3: Ethnic composition
Figure 4: Diagnostic category
Figure 5: Status (new or continuing client)

- II. Method of Administration**
Figure 6: Comparison of CA-QOL and QL-SF by administration method
- Most clients were able to complete the instruments without assistance (approximately 60%).
 - Some clients required assistance (approximately 23%).
 - Relatively few clients required total interviewer administration (approximately 15%).
- Differences related to method of administration not illustrated on Figure 6:*
- For either instrument, more clients with mood disorders can complete the instruments without assistance than can clients with schizophrenia or other psychotic diagnoses.

- III. Completion Time**
Figure 7: Comparison of CA-QOL and QL-SF by administration time requirements
- Approximately 75% of clients can complete either instrument in 20 minutes or less.
 - Approximately 90% of clients can complete either instrument in 30 minutes or less.
- Table 1: Differences related to completion time*
- Instrument. In all demographic categories (except for Hispanics and clients requiring total interviewer administration) the mean (average) completion time for the *CA-QOL* was less (faster) than for the *QL-SF*.
 - Administration method. The mean completion time for clients who completed the instruments without assistance was faster than for those who were partially or fully assisted by an interviewer.
 - Diagnoses. For either instrument, clients with mood disorders can complete the instruments somewhat faster than can clients with schizophrenia/psychoses diagnoses.

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- Order. Either instrument, when administered second, was faster to complete than the instrument administered first.

III. Completion Time (cont.)

- Age. There was no statistically significant difference in mean completion time for either instrument when analyzed by age.
- Gender. There was no statistically significant difference in mean completion time for either instrument when analyzed by gender.
- Ethnicity. A statistically significant difference in mean completion time was found for ethnicity for both instruments.
 - For the *CA-QOL*, Whites and African Americans required less time than Hispanics and Asians.
 - For the *QL-SF*, (1) Whites required less time than Hispanics, and (2) Whites, African Americans, and Hispanics all required less time than Asians. Although based on only 14 Asian clients, it appears that Asians may have some difficulty interpreting the “smiley faces” on the *QL-SF*.

IV. Psychometric Comparison of Instruments (*Table 2*)

Reliability

- The overall reliability of the *CA-QOL* is high (.93).
- The overall reliability of the *QL-SF* is lower (.70 based on an internal consistency measure of reliability), even when removing the “if yes” questions and #20 “how do you like the D/T scale”. Reliability goes up slightly (.71) if questions 2 through 5 are removed (comparable questions are not on the *CA-QOL*).

Reliability is lower for the *QL-SF* probably due to the fact that it is composed mostly of objective items of yes/no or categorical format and usually only one item per subjective subscale. The appropriate reliability strategy would be test-retest which was not available.

- The reliability of all *CA-QOL subjective* scales is relatively high (.84 - .93).
- The reliability of the three *CA-QOL objective* scales with more than 1 item is modest (.67 - .75).
- The reliability of *QL-SF subjective* scales can only be computed for General Life Satisfaction (which is only slightly lower than for same two items on *CA-QOL*). All other *QL-SF subjective* subscale are based on one item.
- The reliability coefficients of the three *QL-SF objective* subscales (.73 - .76) reported for the *CA-QOL* are very similar to those of the *CA-QOL*.

Correlations

- Scores on both instruments generally correlate well.

Validity

- Both instruments were based on Lehman's *QOL-Brief* instrument which has demonstrated validity. By extrapolation, the *QL-SF* and *CA-QOL* are therefore valid.
- Both instruments measure the CMHPC domains and so are assumed to be content valid for purposes of the California Adult Performance Outcome System.

V. Statistically Significant Differences on the *Subjective* Subscale Scores by Demographic Category

- Age. There were no meaningful differences on subscale scores for age.
- Gender. There was one statistically significant difference on subscale mean scores for gender. On the *CA-QOL* General Life Satisfaction subscale, males had a significantly higher mean score than did females. However, when analyzed within diagnosis, the only significant difference found was for clients with mood disorders. Interestingly, for clients with schizophrenia or other psychotic diagnoses, females had somewhat higher scores on this subscale.
- Ethnicity. There were no meaningful differences on subscale scores for ethnicity.
- Diagnosis. There were some statistically significant differences on mean scores by diagnosis for certain subscales:
 - For *CA-QOL* subscales General Life Satisfaction, Satisfaction with Family Relationships, and Satisfaction with Health, clients diagnosed with mood disorders received lower scores than did clients with other diagnoses.
 - For *QL-SF* subscale General Life Satisfaction, clients diagnosed with mood disorders also received lower scores than clients with other diagnoses.

VI. Conclusion

The *CA-QOL* is an acceptable alternative to the *QL-SF*. The psychometric properties (reliability and validity) of the *CA-QOL* are acceptable. A comparison of completion time and method of administration indicates only minor differences between the two instruments. An analysis of subscale scores by demographic category indicates only minor statistically significant differences. Although both instruments (when combined with CSI data) measure the same CMHPC domains (*Table 3*), the *CA-QOL* provides more complete information for the subjective domains (three items rather than one).